

**Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions**

A Public Document

1. Agency Name City of Lemon Grove Division, Department, or Region (if applicable) City Managers Department Designated Agency Contact (Name, Title) Lydia Romero, City Manager Area Code/Phone Number E-mail 619-825-3800 lromero@lemongrove.ca.gov		Date Stamp <div style="border: 1px solid black; padding: 5px; text-align: center;"> California Form 802 RECEIVED MAR - 8 2018 CITY MANAGER DEPARTMENT For Official Use Only </div> <input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ <small>(month, day, year)</small>
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2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 40.00

Event Description: 4th Annual Salute to Women of color Date(s) 03 / 17 / 18
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: North San Diego County NAACP
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☐ No ☒ If yes: _____
Official's Name (Last, First)

3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Vasquez, Racquel, Mayor	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Performance of a ceremonial role or function representing the City at the event (Applicable City Policy 5.3, [a])
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

 _____ <small>Signature of Agency Head or Designee</small>	Lydia Romero _____ <small>Print Name</small>	City Manager _____ <small>Title</small>	_____ <small>(month, day, year)</small>
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Comment: _____